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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/892,359	06/28/2001	Kurt A. Keil	KK#2-3	2197

7590 12/06/2001

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113 Cross Creek Dr., R.D. #5  
Pottsville, PA 17901

EXAMINER

TRAN A, PHI DIEU N

ART UNIT	PAPER NUMBER
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3635

DATE MAILED: 12/06/2001

Please find below and/or attached an Office communication concerning this application or proceeding.



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SERIAL NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.

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DATE MAILED:

**INFORMALITY RE PAYMENT OF FEE**

The informality regarding the payment of the fee in connection with ☐ the original filing fee ☐ the amendment filed \_\_\_\_\_ is indicated below.

**A. FEE DUE**

- ☐ The amendment is considered incomplete in that the funds in Deposit Account No. \_\_\_\_\_ are insufficient to cover the entire fee due. The balance is due within the period set below.
- ☐ The amendment is considered an incomplete response, in that payment of \$ \_\_\_\_\_ is insufficient to cover the claims as shown in the attached Patent Application Fee Determination Record. Remittance is due within the period set below.
- ☐ The amendment has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the period set below.

- ☒ The filing fee of \$ \_\_\_\_\_ submitted in this application is insufficient.  
A balance of \$ 60.00 is due for additional claims. TOTAL DUE \$849.00  
PAID \$789.00

- ☐

APPLICANT IS GIVEN THE REMAINDER OF THE SET PERIOD FOR RESPONSE,  
OR ONE (1) MONTH FROM THE DATE OF THIS LETTER, WHICHEVER IS LONGER,  
WITHIN WHICH TO REMIT THE FEE OF \$ 60.00.

**B. EXCESS PAYMENT:**

- ☐ It is noted that payment of \$ \_\_\_\_\_ is in excess of the amount necessary to cover the claims now in the application. See the attached Patent Application Fee Determination Record.

This matter of refund or credit to your account is being referred to the Finance Officer, for his consideration.

CLERK OF GROUP